ill in this information to identify your case:	
United States Bankruptcy Court for the:	
WESTERN DISTRICT OF MICHIGAN	
Case number (if known)	Chapter you are filing under:
	■ Chapter 7
	☐ Chapter 11
	☐ Chapter 12
	☐ Chapter 13

## Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Hillary First name M.	First name
		Middle name	Middle name
	Bring your picture identification to your meeting with the trustee.	Haviland Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8166	

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Debtor 1 Hillary M. Haviland Case number (if known)

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)  EIN	☐ I have not used any business name or EINs.  Business name(s)  EIN
Where you live	641 3rd St. NW	If Debtor 2 lives at a different address:
	Grand Rapids, MI 49504  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
	Kent County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
Why you are choosing this district to file for pankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)
	Employer Identification lumbers (EIN) you have used in the last 8 years include trade names and doing business as names.  Where you live  Why you are choosing this district to file for	In plusiness names and imployer Identification lumbers (EIN) you have sed in the last 8 years include trade names and loing business as names    Business name(s)

Case number (if known)

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7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Required by</i> page 1 and check the appropriate	11 U.S.C. § 342(b) for Individuals Filing for Bankru box.	ıptcy
	choosing to file under	■ Ch	napter 7				
		☐ Ch	napter 11				
		☐ Ch	napter 12				
		☐ Ch	napter 13				
8.	How you will pay the fee		about how yo	u may pay. Typ attorney is subr	ically, if you are paying the fee yo	with the clerk's office in your local court for more urself, you may pay with cash, cashier's check, or lf, your attorney may pay with a credit card or che	money
						n, sign and attach the Application for Individuals to	o Pay
			I request that but is not req applies to you	t my fee be wa uired to, waive y ır family size an	our fee, and may do so only if your fee, and may do so only if you do you are unable to pay the fee in	only if you are filing for Chapter 7. By law, a judg ur income is less than 150% of the official poverty installments). If you choose this option, you must all Form 103B) and file it with your petition.	line tha
).	Have you filed for bankruptcy within the last 8 years?	■ No					
	last o years:	□ 1e	s. District		When	Case number	
			District		When	Case number	
			District		When	Case number	
0.	Are any bankruptcy cases pending or being	■ No					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Ye	S.				
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
1.	Do you rent your residence?	□No					
		■ Ye	s. Has yo	ur landlord obta	lined an eviction judgment agains	you?	
				No. Go to line	12.		
						udgment Against You (Form 101A) and file it with	

Debtor 1 Hillary M. Haviland

Case number (if known) Hillary M. Haviland Debtor 1 Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or Chapter 11 of the Bankruptcy Code, and you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, are you a small business cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. debtor or a debtor as § 1116(1)(B). defined by 11 U.S.C. § 1182(1)? I am not filing under Chapter 11. ■ No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and ☐ Yes. I do not choose to proceed under Subchapter V of Chapter 11. I am filing under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I ☐ Yes. choose to proceed under Subchapter V of Chapter 11. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention? For example, do you own perishable goods, or livestock that must be fed, Where is the property? or a building that needs urgent repairs? Number, Street, City, State & Zip Code

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Debtor 1 Hillary M. Haviland

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

### 15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

#### Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

## About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
 counseling because of:

## ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Hillary M. Haviland Debtor 1 Case number (if known) **Answer These Questions for Reporting Purposes** Part 6: 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. ■ Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. □ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **1** 25,001-50,000 1-49 you estimate that you **5001-10.000 5**0.001-100.000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion \$0 - \$50,000 estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **□** \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **□** \$100.001 - \$500.000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$0 - \$50.000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100.000.001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Hillary M. Haviland Signature of Debtor 2 Hillary M. Haviland Signature of Debtor 1 Executed on March 16, 2021 Executed on

MM / DD / YYYY

MM / DD / YYYY

3/18/21 10:53AM

Debtor 1 Hillary M. Haviland Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Ryan F. Beach Signature of Attorney for Debtor	Date	March 16, 2021 MM / DD / YYYY
Ryan F. Beach Printed name		
The Law Offices of Ryan F. Beach, PLLC Firm name		
1550 East Beltline Ave. SE, Suite 300 Grand Rapids, MI 49506		
Number, Street, City, State & ZIP Code	For all and doors	rfboooklaw@amail.com
Contact phone (616) 389-0629 P71022 MI	Email address	rfbeachlaw@gmail.com
Bar number & State		<del></del>

				3/18/21 10:53AM
Fill in this infor	mation to identify your	case:		
Debtor 1	Hillary M. Havilar	nd		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	WESTERN DISTRICT O	DF MICHIGAN	
Case number				
(if known)				☐ Check if this is an amended filing
Official Fo	orm 106Sum			
- · · · · · · ·				

## **Summary of Your Assets and Liabilities and Certain Statistical Information**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct

1.	Schedule A/B: Property (Official Form 106A/B)	Your a	ssets
1.	Schedule A/B: Property (Official Form 106A/B)		of what you own
	1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	13,157.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	13,157.00
Part	2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	26,012.00
<b>.</b>	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	3,187.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	90,745.39
	Your total liabilities	\$	119,944.39
Part	3: Summarize Your Income and Expenses		
١.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,500.00
j.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,500.00
art	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sc	hedules.
<b>'</b> .	■ Yes What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Debtor 1 Hillary M. Haviland

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ 3,079.56

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	im
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	3,187.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	5,472.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	8,659.00

2/1	0/21	10.53	A B A

							3/18/21 10:53A
Fill in this info	ormation to identi	fv vour case a	nd this filina:				
			<u> </u>				
Debtor 1	Hillary M. H	Haviland	Middle Name	Last Name			
Debtor 2	i iist ivaille		Middle Name	Lastivanie			
(Spouse, if filing)	First Name		Middle Name	Last Name			
Linitari Otataa I	Danilari interi Carant f		TERM DISTRICT OF	T MICLUCAN			
United States E	Bankruptcy Court to	or the: WEST	TERN DISTRICT OF	- MICHIGAN			
Case number							Check if this is an
						_	amended filing
							_
~ · · -		_					
Official F	<u>orm 106A/</u>	<u>B</u>					
Schedu	ile A/B: P	Property	V				12/15
				nce. If an asset fits in more than	one category list the asset	in the c	
think it fits best.	Be as complete and ore space is needed	d accurate as po	ossible. If two marrie	d people are filing together, both n. On the top of any additional pa	are equally responsible for	supply	ing correct
Part 1: Describ	oe Each Residence,	Building, Land,	or Other Real Estate	You Own or Have an Interest In			
4. Da we	a base any lawal .	amiliable leter	-4 lm amy ma-1-1 1	wilding land on the line and the			
1. Do you own o	or nave any legal or o	equitable interes	st in any residence, b	ouilding, land, or similar property?	<i>(</i>		
■ No. Go to P	Part 2.						
☐ Yes Where	e is the property?						
100. VIII010	o to the property.						
Part 2: Describ	oe Your Vehicles						
	·		hicles, motorcycle	ule G: Executory Contracts and a	Oriexpired Leases.		
3.1 Make:	Jeep		Who has an intere	est in the property? Check one	Do not deduct secure		
	Compass		_	23th the property: Check one	the amount of any sec Creditors Who Have (		
Model: Year:	2018		Debtor 1 only		Creditors who have t	Jiaiiiis S	ecured by Froperty.
	nate mileage:	74,000	☐ Debtor 2 only ☐ Debtor 1 and D	lehter 2 only	Current value of the entire property?		rrent value of the rtion you own?
Other info		14,000	_	the debtors and another	omino proporty :	po	you own.
			- At least one of	and district			
			Check if this is (see instructions)	s community property	\$10,000.00	<u> </u>	\$10,000.00
,	•	,		al vehicles, other vehicles, ar sels, snowmobiles, motorcycle			

Official Form 106A/B Schedule A/B: Property page 1

Debtor 1	Hillary M. Haviland	Case number (if known	n)
Ехатр	hold goods and furnishings oles: Major appliances, furniture, linens, china, kitchenware		
□ No ■ Yes.	s. Describe		
	Misc. household goods and furnishings (no \$625.00)	single item worth over	\$500.00
□No	conics  coles: Televisions and radios; audio, video, stereo, and digital equipment; including cell phones, cameras, media players, games  describe	computers, printers, scanners; music	collections; electronic devices
	Cell phone, Kindle, laptop computer, and he	eadphones	\$350.00
Examp  ■ No	tibles of value  bles: Antiques and figurines; paintings, prints, or other artwork; books, pic  other collections, memorabilia, collectibles	ctures, or other art objects; stamp, co	n, or baseball card collections;
Examp  ■ No	nent for sports and hobbies  bles: Sports, photographic, exercise, and other hobby equipment; bicycle musical instruments  Describe	s, pool tables, golf clubs, skis; canoe	s and kayaks; carpentry tools;
■ No	rms  nples: Pistols, rifles, shotguns, ammunition, and related equipment  Describe		
□ No	es  nples: Everyday clothes, furs, leather coats, designer wear, shoes, acces  Describe	sories	
_ 100.	Misc. clothing		\$300.00
■ No	Iry nples: Everyday jewelry, costume jewelry, engagement rings, wedding rin Describe	ngs, heirloom jewelry, watches, gems	, gold, silver
Exam ■ No	arm animals  nples: Dogs, cats, birds, horses  Describe		
■ No	other personal and household items you did not already list, including.  Give specific information	ng any health aids you did not list	
	the dollar value of all of your entries from Part 3, including any entropy and 3. Write that number here		\$1,150.00
Part 4: De	escribe Your Financial Assets		

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?

3/18/21 10:53AM

De	ebtor 1	Hillary M. Hav	viland		Case number (if known)	
						Do not deduct secured claims or exemptions.
	□ No <sup>′</sup>		ave in your wallet, in your ho	me, in a safe deposit box, and on	hand when you file your petition	
					Cash	\$7.00
				unts; certificates of deposit; share with the same institution, list each		uses, and other similar
	Yes			Institution name:		
			17.1. Checking	Citizens Bank #8576		\$1,000.00
18.			r publicly traded stocks nvestment accounts with bro	kerage firms, money market acco	punts	
	_		Institution or issuer r	name:		
19.	Non-pu joint ve		ck and interests in incorpo	orated and unincorporated busin	nesses, including an interest i	n an LLC, partnership, and
	■ No					
	⊔ Yes.	Give specific info	rmation about them Name of entity:		% of ownership:	
20.	Negotia	able instruments i	nclude personal checks, casl	tiable and non-negotiable instruhiers' checks, promissory notes, ansfer to someone by signing or de	and money orders.	
		Give specific infor	mation about them Issuer name:			
	Examp ■ No	nent or pension a bles: Interests in IF List each account	RA, ERISA, Keogh, 401(k), 40 separately.	03(b), thrift savings accounts, or o	other pension or profit-sharing pla	ans
			Type of account:	Institution name:		
22.	Your sh Examp		deposits you have made so	that you may continue service or bublic utilities (electric, gas, water)		s, or others
	■ No □ Yes			Institution name or individu	ıal:	
23.	Annuiti	ies (A contract for	a periodic payment of mone	y to you, either for life or for a nun	nber of years)	
	■ No □ Yes	Iss	uer name and description.			
	Interest	s in an education	·	ualified ABLE program, or unde	r a qualified state tuition prog	ram.
	■ No □ Yes			. Separately file the records of an	y interests.11 U.S.C. § 521(c):	
	_	equitable or futu	ure interests in property (ot	ther than anything listed in line	1), and rights or powers exerc	cisable for your benefit
	■ No □ Yes.	Give specific info	rmation about them			

Official Form 106A/B Schedule A/B: Property page 3

Debtor 1	Hillary M. Haviland		Case	number (if known)	
Exan	nts, copyrights, trademarks, trademarks, trademarks, trademarks, trademarks, trademarks, we	le secrets, and other intellectual proposites, proceeds from royalties and li	roperty censing agreements		
■ No □ Yes	s. Give specific information about	them			
27. <b>Licen</b> <i>Exan</i>	ses, franchises, and other gene nples: Building permits, exclusive	ral intangibles icenses, cooperative association hole	dings, liquor licenses, p	professional licenses	
■ No □ Yes	s. Give specific information about	them			
Money or	r property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No	efunds owed to you  s. Give specific information about to	hem, including whether you already f	iled the returns and the	e tax years	
		Anticipated 2020 federal tax debtor expects to owe	refunds -		\$0.00
		Anticipated 2020 state tax re expects to owe	efunds - debtor		\$0.00
		Anticipated 2021 federal tax prorated estimate	refunds -		\$100.00
		Anticipated 2021 state tax re prorated estimate	efunds -		\$100.00
Exan ■ No	y support nples: Past due or lump sum alimo	ony, spousal support, child support, m	naintenance, divorce se	ettlement, property settle	ement
Exan	r amounts someone owes you nples: Unpaid wages, disability ins benefits; unpaid loans you so. Give specific information	urance payments, disability benefits, made to someone else	sick pay, vacation pay	, workers' compensatio	on, Social Security
	]	Shipt income			\$800.00
<i>Exan</i> ■ No	ests in insurance policies inples: Health, disability, or life insurance company o Company		); credit, homeowner's, Beneficiary:	or renter's insurance	Surrender or refund value:
If you some		ou from someone who has died st, expect proceeds from a life insurar	nce policy, or are curre	ntly entitled to receive p	property because

Official Form 106A/B Schedule A/B: Property page 4

3/18/21 10:53AM Hillary M. Haviland Case number (if known) Debtor 1 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$2,007.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6 ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... \$0.00 List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00

Part 8:

56. Part 2: Total vehicles, line 5 \$10,000.00

\$13,157.00

57. Part 3: Total personal and household items, line 15 \$1,150.00 58. Part 4: Total financial assets, line 36 \$2,007.00 59. Part 5: Total business-related property, line 45

\$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00

Part 7: Total other property not listed, line 54 \$0.00

63. Total of all property on Schedule A/B. Add line 55 + line 62

Total personal property. Add lines 56 through 61...

Copy personal property total

\$13,157.00

\$13,157.00

Official Form 106A/B Schedule A/B: Property page 5

Fill in this information to identify your case:							
Hillary M. Havilan	d						
First Name	Middle Name	Last Name					
First Name	Middle Name	Last Name					
kruptcy Court for the:	WESTERN DISTRICT C	DF MICHIGAN					
				Check if this is an amended filing			
	Hillary M. Havilan First Name	Hillary M. Haviland First Name Middle Name  First Name Middle Name	Hillary M. Haviland       First Name     Middle Name     Last Name       First Name     Middle Name     Last Name	Hillary M. Haviland  First Name Middle Name Last Name  First Name Middle Name Last Name  kruptcy Court for the: WESTERN DISTRICT OF MICHIGAN			

## Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property	You Claim as Exempt
-------------------------------	---------------------

1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
	■ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	unt of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Chec	ck only one box for each exemption.	11 U.S.C. § 522(d)(3)  11 U.S.C. § 522(d)(3)  11 U.S.C. § 522(d)(3)  11 U.S.C. § 522(d)(5)  11 U.S.C. § 522(d)(5)
Misc. household goods and furnishings (no single item worth	\$500.00	•	\$500.00	
over \$625.00) Line from <i>Schedule A/B</i> : <b>6.1</b>			100% of fair market value, up to any applicable statutory limit	
Cell phone, Kindle, laptop computer, and headphones	\$350.00		\$350.00	11 U.S.C. § 522(d)(3)
Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
Misc. clothing Line from Schedule A/B: 11.1	\$300.00		\$300.00	11 U.S.C. § 522(d)(3)  11 U.S.C. § 522(d)(3)  11 U.S.C. § 522(d)(3)  11 U.S.C. § 522(d)(5)  11 U.S.C. § 522(d)(5)
			100% of fair market value, up to any applicable statutory limit	
Cash Line from Schedule A/B: 16.1	\$7.00		\$7.00	11 U.S.C. § 522(d)(5)
			100% of fair market value, up to any applicable statutory limit	
Checking: Citizens Bank #8576 Line from Schedule A/B: 17.1	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(3)  11 U.S.C. § 522(d)(3)  11 U.S.C. § 522(d)(5)
LINE HOIN SCHEUUIE AVD. 11.1			100% of fair market value, up to any applicable statutory limit	

De	btor 1 Hillary M. Haviland			Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	Anticipated 2020 federal tax refunds - debtor expects to owe	\$0.00		\$2,000.00	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	
	Anticipated 2020 state tax refunds - debtor expects to owe	\$0.00		\$1,000.00	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B: 28.2			100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)  11 U.S.C. § 522(d)(5)  11 U.S.C. § 522(d)(5)  11 U.S.C. § 522(d)(5)
	Anticipated 2021 federal tax refunds - prorated estimate	\$100.00		\$1,000.00	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B: 28.3			100% of fair market value, up to any applicable statutory limit	
	Anticipated 2021 state tax refunds - prorated estimate	\$100.00		\$1,000.00	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B: 28.4			100% of fair market value, up to any applicable statutory limit	
	Shipt income Line from Schedule A/B: 30.1	\$800.00		\$1,500.00	11 U.S.C. § 522(d)(5)
	Ellie Holli Schedule A/B. 30.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/22 and every 3 No			led on or after the date of adjustmer	nt.)
	Yes. Did you acquire the property covered	d by the exemption wi	thin 1	,215 days before you filed this case	?
	□ No □ Yes				

		, 5			3/18/21 10:53A
Fill	in this information to identify you	ur case:			
Deb	tor 1 Hillary M. Havila	and			
	First Name	Middle Name Last Name			
	tor 2				
(Spot	use if, filing) First Name	Middle Name Last Name			
Unit	ed States Bankruptcy Court for the	: WESTERN DISTRICT OF MICHIGAN			
Cas	e number				
(if kno				☐ Check	if this is an
				amen	ded filing
∩ffi	icial Form 106D				
		Who Hove Claims Secure	d by Dranart		40/45
<u> </u>	neaule D: Creditors	Who Have Claims Secured	a by Propert	<u>y                                    </u>	12/15
is ne	eded, copy the Additional Page, fill it	If two married people are filing together, both are eq out, number the entries, and attach it to this form. O			
	per (if known). any creditors have claims secured b	w vour property?			
	_ •	his form to the court with your other schedules. You	ou have nothing else t	a report on this form	
	_	•	ou have nothing else t	o report on this form.	
	Yes. Fill in all of the information	below.			
Part	1: List All Secured Claims		Column A	Column B	Column C
		more than one secured claim, list the creditor separately	Amount of claim	Value of collateral	Unsecured
		s a particular claim, list the other creditors in Part 2. As ical order according to the creditor's name.	Do not deduct the value of collateral.	that supports this	portion If any
2.1	Fifth Third Bank	Describe the property that secures the claim:	\$26,012.00	\$10,000.00	\$16,012.00
	Creditor's Name	2018 Jeep Compass 74,000 miles			
	PO Box 630778	As of the date you file, the claim is: Check all that			
	Cincinnati, OH 45263-0778	apply.			
		Contingent			
	Number, Street, City, State & Zip Code	☐ Unliquidated			
\A/I <sub>2</sub> -	a successive debt 2 O	Disputed			
_	o owes the debt? Check one.	Nature of lien. Check all that apply.			
	Debtor 1 only	An agreement you made (such as mortgage or sec	cured		
	Debtor 2 only	car loan)			
	Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
	at least one of the debtors and another	☐ Judgment lien from a lawsuit			
	Check if this claim relates to a	Other (including a right to offset)			
	community debt				
Date	debt was incurred 11/22/2019	Last 4 digits of account number 5745			
Δ٨	ld the dollar value of your entries in C	Column A on this page. Write that number here:	\$26,01	2 00	
	-	the dollar value totals from all pages.			
	rite that number here:		\$26,01	2.00	
Dari	2: List Others to Be Notified fo	or a Debt That You Already Listed			

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

		0.000.22	occoping and		0, 20, 2		<b>.</b>	3/18/21 10:53AN
Fill	in this inform	nation to identify your c	ase:					
Del	otor 1	Hillary M. Haviland						
		First Name	Middle Name	Last Name	•			
	otor 2	First Name	Middle Nove	L t N				
(Spc	ouse if, filing)	First Name	Middle Name	Last Name	9			
Uni	ted States Bar	nkruptcy Court for the:	WESTERN DISTRIC	T OF MICHIGAN				
Cas	se number							
(if kr	nown)						_	if this is an led filing
Sc		1 106E/F /F: Creditors WI				or creditors with NON	PRIORITY claims I i	12/15
any Sche Sche left. nam	executory control edule G: Execut edule D: Credito Attach the Con- e and case nun	racts or unexpired leases to tory Contracts and Unexpirors Who Have Claims Secutinuation Page to this page other (if known).	hat could result in a cla ed Leases (Official For red by Property. If mor . If you have no inform	im. Also list executo m 106G). Do not inclu e space is needed, co	ry contract de any cre py the Part	s on Schedule A/B: F ditors with partially s you need, fill it out, i	roperty (Official For ecured claims that a number the entries in	m 106A/B) and on tre listed in the boxes on the
		I of Your PRIORITY Uns						
1.	_	rs have priority unsecured	claims against you?					
	☐ No. Go to Pa	art 2.						
	Yes.							
2.	identify what typ possible, list the	priority unsecured claims. be of claim it is. If a claim has e claims in alphabetical order than one creditor holds a part	both priority and nonprior according to the creditor	ority amounts, list that or 's name. If you have m	laim here a	nd show both priority a	nd nonpriority amount	ts. As much as
	(For an explana	ation of each type of claim, se	e the instructions for this	form in the instruction	booklet.)			
						Total claim	Priority amount	Nonpriority amount
2.1	Internal	Revenue Service	Last 4 digit	s of account number	8166	\$1,987.00	\$1,987.00	\$0.00
	•	editor's Name	NA/I	uh - dah4 in	2040 20	000		
	PO Box Philade	7346 Iphia, PA 19101	when was	the debt incurred?	2019, 20	020	-	
		reet City State Zip Code	As of the d	ate you file, the claim	is: Check a	III that apply		
	Who incurred	I the debt? Check one.	☐ Continge	ent				
	Debtor 1 o	nly	☐ Unliquid	ated				
	Debtor 2 o	nly	☐ Disputed	I				
	Debtor 1 a	nd Debtor 2 only	Type of PR	IORITY unsecured cla	im:			
	_	e of the debtors and another	☐ Domesti	c support obligations				
	_	his claim is for a communi	_	nd certain other debts y	ou owe the	government		
		ubject to offset?	_	or death or personal inj		•		
	■ No	-	☐ Other. S					
	☐ Yes		_ 001. 0		x (2020 i	s estimated)		

3/18/21 10:53AM

Debtor 1 Hillary M. Haviland		Case number (if known)					
2.2	Michigan Dept of Treasury	Last 4 digits of account number	8166	\$1,200.00	\$1,200.00	\$0.00	
	Priority Creditor's Name Bankruptcy Unit PO Box 30168	When was the debt incurred?	2019 & 2	020			
	Lansing, MI 48909  Number Street City State Zip Code	As of the date you file, the claim	is: Check all	that apply			
٧	Vho incurred the debt? Check one.	☐ Contingent					
	Debtor 1 only	☐ Unliquidated					
	☐ Debtor 2 only	□ Disputed					
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:				
_	☐ At least one of the debtors and another	☐ Domestic support obligations					
_	☐ Check if this claim is for a community debt	■ Taxes and certain other debts y	ou owe the a	overnment			
	s the claim subject to offset?	☐ Claims for death or personal inj	_				
ı	No	Other. Specify					
	☐Yes	Income Ta	(2020 is	estimated)			
un tha	st all of your nonpriority unsecured claims in the secured claim, list the creditor separately for each clain one creditor holds a particular claim, list the other int 2.	laim. For each claim listed, identify wh	at type of cla	im it is. Do not list claims	s already included in	n Part 1. If more	
10	III Z.				Total	l claim	
4.1	ADS/Comenity/Sephora	Last 4 digits of account numb	er 417			\$3,166.00	
	Nonpriority Creditor's Name PO Box 182120 Columbus, OH 43218	When was the debt incurred?				<b>,</b> , , , , , , , , , , , , , , , , , ,	
	Number Street City State Zip Code	As of the date you file, the cla	m is: Check	all that apply			
	Who incurred the debt? Check one.	_					
	Debtor 1 only	Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsect	d alaim.				
	☐ At least one of the debtors and another	Student loans	irea ciaim:				
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a s	eparation agr	eement or divorce that y	ou did not		
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sh	aring plane	and other similar debts			
	■ No		• • •	ina other similar debts			
	Yes	■ Other. Specify Credit Ca	ard				

Debtor	1 Hillary M. Haviland	Case number (if known)				
4.2	ADS/Comenity/Ulta MC	Last 4 digits of account number 536	\$7,407.00			
	Nonpriority Creditor's Name PO Box 182120	When was the debt incurred?				
	Columbus, OH 43218  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	□ Unliquidated				
	Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Credit Card				
		P4M,UK3,W				
4.3	Affirm Inc	Last 4 digits of account number ZT,YMN	\$3,094.00			
	Nonpriority Creditor's Name 650 California ST FL 12 San Francisco, CA 94108	When was the debt incurred?				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify				
4.4	AT&T/U-Verse Nonpriority Creditor's Name	Last 4 digits of account number	\$518.40			
	PO Box 537104 Atlanta, GA 30353	When was the debt incurred?				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	Other. Specify Utility				

Debto	r 1 Hillary M. Haviland	Case number (if known)				
4.5	Bank of America	Last 4 digits of account number 440	\$19,136.00			
	Nonpriority Creditor's Name PO Box 982238 EI Paso, TX 79998	When was the debt incurred?				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	,				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Credit Card				
4.6	Consumers Energy	Last 4 digits of account number	\$66.87			
	Nonpriority Creditor's Name Payment Center PO Box 740309	When was the debt incurred?				
	Cincinnati, OH 45274-0309					
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	Пол				
	_	☐ Contingent				
	Debtor 2 only	Unliquidated				
	Debtor 1 and Debtor 2 only	Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:  ☐ Student loans				
	☐ Check if this claim is for a community debt					
	Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims				
	No	Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	■ Other. Specify Utility				
4.7	Credit One Bank	Last 4 digits of account number 0261	\$625.32			
4.1	Nonpriority Creditor's Name	Last 4 digits of account number 0261	<b>Φ025.32</b>			
	PO Box 60500	When was the debt incurred?				
	City of Industry, CA 91716-0500  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	no of the date you me, the stand of cook all that apply				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	□ Yes	■ Other. Specify				

Debto	<sup>1</sup> Hillary M. Haviland	Case number (if known)	
4.8	DTE Energy Nonpriority Creditor's Name	Last 4 digits of account number 0423	\$285.33
	PO Box 740786 Cincinnati, OH 45274-0786	When was the debt incurred?	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Utility	
4.9	Envision Medical Group	Last 4 digits of account number 2003	\$70.00
	Nonpriority Creditor's Name PO Box 1870 Cary, NC 27512-1870	When was the debt incurred?	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Services	
4.1	Henry Ford Health System	Last 4 digits of account number 2648	\$2,780.00
<u> </u>	Nonpriority Creditor's Name PO Box 553920	When was the debt incurred?	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Services	

Debto	1 Hillary M. Haviland	Case number (if known)				
4.1	JPMCB Card Services	Last 4 digits of account number 414,414	\$15,174.00			
	Nonpriority Creditor's Name PO Box 15369	When was the debt incurred?				
	Wilmington, DE 19850  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Credit Card				
4.1	JPMCB Card Services	Last 4 digits of account number 4385	\$9,654.57			
	Nonpriority Creditor's Name PO Box 15369 Wilmington, DE 19850	When was the debt incurred?				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Credit Card				
4.1	LMCU	Last 4 digits of account number 169	\$5,068.00			
3	Nonpriority Creditor's Name					
	4027 Lake DR SE Grand Rapids, MI 49546	When was the debt incurred?				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Credit Card				

Debt	tor 1 Hillary M. Haviland	Case number (if known)	
4.1 4	Mercy Health Saint Mary's	Last 4 digits of account number 9269	\$25.00
	Nonpriority Creditor's Name PO Box 932997	When was the debt incurred?	
	Cleveland, OH 44193  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Services	
4.1	Minto Money	Last 4 digits of account number	\$866.74
5	Nonpriority Creditor's Name		******
	PO Box 58112	When was the debt incurred?	
	Minto, AK 99758  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	7.6 of the date you me, the stall let officer all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Loan	
4.1 6	NHHELC/GSM&R	Last 4 digits of account number 0074,5974	\$5,472.00
<u> </u>	Nonpriority Creditor's Name PO Box 3420	When was the debt incurred?	· · · · · · · · · · · · · · · · · · ·
	Concord, NH 03302  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	☐ Other. Specify	
		Student Loan(s)	

Debto	r 1 Hillary M. Haviland	Case number (if known)					
4.1	Novi Ridge Apartments	Last 4 digits of account number 1073	\$1,479.00				
	Nonpriority Creditor's Name 23640 Chipmunk Trail Novi, MI 48375	When was the debt incurred?					
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	Debtor 1 only	Contingent					
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed					
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No	Type of NONPRIORITY unsecured claim:  ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify Lease					
4.1	PNC Bank Nonpriority Creditor's Name	Last 4 digits of account number	\$510.17				
	PO Box 856177 Louisville, KY 40285	When was the debt incurred?					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated					
	Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	□ Disputed  Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify overdraft fees					
4.1 9	SYNCB/PPC Nonpriority Creditor's Name	Last 4 digits of account number 604	\$6,032.99				
	PO Box 530975 Orlando, FL 32896 Number Street City State Zip Code	When was the debt incurred?					
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	Debtor 1 only	Contingent					
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes	■ Other. Specify Credit Card					

Debto	or 1 Hillary M. Haviland		Case number (if known)	
4.2 0	Synchrony Bank/Art Van	Last 4 digits of account numb	7006	\$9,314.00
	Nonpriority Creditor's Name PO Box 965036 Orlando, FL 32896	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the cla	im is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecu	ured claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a s report as priority claims	eparation agreement or divorce that you did no	ot
	No	Debts to pension or profit-sh	aring plans, and other similar debts	
	Yes	Other. Specify Credit Ca	ard	
Part 3	List Others to Be Notified About a D	ebt That You Already Listed		
is try have	this page only if you have others to be notified ying to collect from you for a debt you owe to s e more than one creditor for any of the debts th fied for any debts in Parts 1 or 2, do not fill out	someone else, list the original credito nat you listed in Parts 1 or 2, list the a	or in Parts 1 or 2, then list the collection age	ency here. Similarly, if you
	and Address	On which entry in Part 1 or Part 2 did		
_	National Services Sox 469046	Line 4.12 of (Check one):	Part 1: Creditors with Priority Unsecured	
_	ondido, CA 92046-9046		Part 2: Creditors with Nonpriority Unsecu	red Claims
	·	Last 4 digits of account number	0570	
Name	and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?	
First	Credit Incorporated	Line 4.14 of (Check one):	☐ Part 1: Creditors with Priority Unsecured	Claims
_	Sox 630659		■ Part 2: Creditors with Nonpriority Unsecu	red Claims
Cinci	innati, OH 45263-0659	Last 4 digits of account number	7817	
	and Address	On which entry in Part 1 or Part 2 did		
	ey & Associates Inc.	Line 4.6 of (Check one):	Part 1: Creditors with Priority Unsecured	
	E. Center St. saw, IN 46580		Part 2: Creditors with Nonpriority Unsecu	red Claims
	, , , , , , , , , , , , , , , , , , , ,	Last 4 digits of account number	0311	
Name	and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?	
	hants & Medical Debt Corp	Line 4.10 of (Check one):	☐ Part 1: Creditors with Priority Unsecured	Claims
	Taylor Drive , MI 48507-4685		■ Part 2: Creditors with Nonpriority Unsecu	red Claims
riiii,	, WII 40307-4003	Last 4 digits of account number	8802	
	and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?	
	and Credit Management, Inc	Line 4.1 of (Check one):	☐ Part 1: Creditors with Priority Unsecured	
Suite	Camino De La Reina 2 100		Part 2: Creditors with Nonpriority Unsecu	red Claims
	Diego, CA 92108			
	•	Last 4 digits of account number	6314	
Name	and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?	
	and Credit Management, Inc	Line 4.2 of (Check one):	☐ Part 1: Creditors with Priority Unsecured	Claims
350 C Suite	Camino De La Reina 2 100		■ Part 2: Creditors with Nonpriority Unsecu	red Claims
	; 100 Diego, CA 92108			
	<u>-</u> ·	Last 4 digits of account number	1620	
Name	and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?	
	and Credit Management, Inc	Line 4.7 of (Check one):	☐ Part 1: Creditors with Priority Unsecured	Claims
350 C Suite	Camino De La Reina e 100		Part 2: Creditors with Nonpriority Unsecu	red Claims
	·			

Debtor 1 Hillary M. Haviland		Case number (if known)			
San Diego, CA 92108					
	Last 4 digits of account number	8768			
Name and Address	On which entry in Part 1 or Part 2 did y	ou list the original creditor?			
National Enterprise Systems	Line <b>4.18</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims			
2479 Edison Blvd, Unit A Twinsburg, OH 44087-2340		■ Part 2: Creditors with Nonpriority Unsecured Claims			
Twillsburg, On 44007-2340	Last 4 digits of account number	3761			
Name and Address	On which entry in Part 1 or Part 2 did y	ou list the original creditor?			
Penn Credit Corporation	Line 4.8 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
2800 Commerce Drive Harrisburg, PA 17110		■ Part 2: Creditors with Nonpriority Unsecured Claims			
Than is saig, i A i i i i	Last 4 digits of account number	1950			
Name and Address	On which entry in Part 1 or Part 2 did y	ou list the original creditor?			
Portfolio Recovery Associates	Line <b>4.19</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims			
PO Box 12914 Norfolk, VA 23541		■ Part 2: Creditors with Nonpriority Unsecured Claims			
Notion, VA 20071	Last 4 digits of account number	2182			
Name and Address	On which entry in Part 1 or Part 2 did y	ou list the original creditor?			
Revco Solutions	Line 4.6 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
PO Box 2589 Columbus, OH 43216-2589		■ Part 2: Creditors with Nonpriority Unsecured Claims			
Columbus, Off 43210-2309	Last 4 digits of account number				
Name and Address	On which entry in Part 1 or Part 2 did y	you list the original creditor?			
Sequim Asset Solutions	Line <b>4.4</b> of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
1130 Northchase Parkway		■ Part 2: Creditors with Nonpriority Unsecured Claims			
Suite 150					
Marietta, GA 30067	Last 4 digits of account number	4525			
Name and Address	On which entry in Part 1 or Part 2 did y	you list the original creditor?			
True Accord	Line <b>4.3</b> of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
16011 College Blvd		■ Part 2: Creditors with Nonpriority Unsecured Claims			
Suite 130		Tan 2. Olsanois minition, priority chassassa chamb			
Lenexa, KS 66219	Last 4 digits of account number	2422			
Name and Address	On which entry in Part 1 or Part 2 did y	you list the original creditor?			
True Accord	Line 4.15 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
16011 College Blvd		■ Part 2: Creditors with Nonpriority Unsecured Claims			
Suite 130 Lenexa, KS 66219					
Lenexa, No 30213	Last 4 digits of account number	0492			
Name and Address	On which entry in Part 1 or Part 2 did y	ou list the original creditor?			
U.S. Attorney	Line <b>4.16</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims			
Bankruptcy Section PO Box 208		■ Part 2: Creditors with Nonpriority Unsecured Claims			
Grand Rapids, MI 49501-0208					
	Last 4 digits of account number				

## Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Total	6a.	Domestic support obligations	6a.	\$ 0.00
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 3,187.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00

Case number (if known)

## Debtor 1 Hillary M. Haviland

				•	,
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	3,187.00
Total	6f.	Student loans	6f.	\$	Total Claim 5,472.00
claims from Part 2	. 6g. 6h.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6g. 6h.	\$ 	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	85,273.39
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	90,745.39

3/1	8/21	10.53	$\Delta M$

Fill in this infor	mation to identify your				
Debtor 1 Hillary M. Haviland					
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT (	OF MICHIGAN		
Case number (if known)				☐ Check if this is amended filing	

# Official Form 106G

# **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Carlo Chacon
12744 Blue Lagoon Dr.
Shelbyville, MI 49344

State what the contract or lease is for
Residential lease / month-to-month tenancy / Debtor is current and will assume

Case:21-00680-itg Doc #:1 Filed: 03/18/2021 Page 30 of 58

		cocco jig = co.		,_c rage co	3/18/21 10:53AN
Fill in this	information to identify your	case:			
Debtor 1	Hillary M. Havilar	nd			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	WESTERN DISTRICT	OF MICHIGAN		
Case num (if known)	ber				☐ Check if this is an amended filing
Officia	l Form 106H				
Sched	lule H: Your Cod	ebtors			12/15
people are ill it out, a our name		ally responsible for sup boxes on the left. Attack Answer every question	plying correct informat h the Additional Page t n.	ion. If more space is need to this page. On the top of	eded, copy the Additional Page, of any Additional Pages, write
	, ,	,			
■ No □ Yes	S				
	hin the last 8 years, have you a, California, Idaho, Louisiana				states and territories include
_	Go to line 3.  S. Did your spouse, former spo	use, or legal equivalent liv	e with you at the time?		
in line Form	2 again as a codebtor only	if that person is a guarar	ntor or cosigner. Make	sure you have listed the	with you. List the person shown creditor on Schedule D (Official chedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The cred Check all schedules	itor to whom you owe the debt that apply:
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	e
_				☐ Schedule G, line	
	Number Street City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, line ☐ Schedule G, line	e
-	Number Street			_	
	City	State	ZIP Code		

3/18/21 10:53AM

Fill	in this information to identi	fy your ca	se:								
Del	otor 1 Hillar	ry M. Ha	viland			_					
	otor 2 ouse, if filing)					_					
Uni	ted States Bankruptcy Cou	urt for the:	WESTERN DISTRICT	OF MICHIGAN							
	se number nown)						□ An		d filing ent showing	postpetition	chapter
$\bigcirc$	fficial Form 106	el.					13	income a	as of the foll	owing date:	
	fficial Form 106 chedule I: You	_					M	// DD/ Y	YYY		12/15
sup spo atta	as complete and accurate plying correct information use. If you are separated ch a separate sheet to this time.  Describe Employers	n. If you a and your is form. C	re married and not filing wi	ng jointly, and your s th you, do not includ	pouse i le inforr	s liv natio	ing with yon about	ou, inclu your spo	ude informa ouse. If mor	ation about e space is i	your needed,
1.	Fill in your employment information.	t		Debtor 1				Debtor 2	or non-filii	ng spouse	
	If you have more than one job,		Employment status	■ Employed				☐ Employed			
	attach a separate page winformation about addition		Employment status	☐ Not employed				☐ Not employed			
	employers.		Occupation	delivery							
	Include part-time, season self-employed work.	nal, or	Employer's name	Shipt, Inc.							
	Occupation may include or homemaker, if it applies		Employer's address	17 20th St. N, Ste Birmingham, AL							
			How long employed to	here? approx.	1 year			_			
Par	t 2: Give Details Ab	oout Mon	hly Income								
	mate monthly income as use unless you are separat		te you file this form. If	you have nothing to re	port for	any l	line, write	\$0 in the	space. Inclu	ıde your nor	n-filing
	u or your non-filing spouse e space, attach a separate			ombine the information	o for all e	mplo	oyers for tl	nat perso	n on the line	es below. If y	ou need
							For Debt	tor 1	For Debt	or 2 or g spouse	
2.	List monthly gross wag deductions). If not paid n				2.	\$	2,	500.00	\$	N/A	
3.	Estimate and list month	nly overtii	ne pay.		3.	+\$		0.00	+\$	N/A	

2,500.00

N/A

Calculate gross Income. Add line 2 + line 3.

Debt	or 1	Hillary M. Haviland				Case	number ( <i>if ki</i>	nown)				
	0	u line A base		4			Debtor 1		n	or Debtor	spouse	
	Сор	y line 4 here		4.		\$	2,500	).00	_ \$		N/A	<u>.</u>
5.	List	all payroll deductions:										
	5a.	Tax, Medicare, and Social	Security deductions	58		\$	(	0.00	_		N/A	
	5b.	Mandatory contributions	•	5k		\$		0.00	_		N/A	_
	5c.	Voluntary contributions for	-	50		\$		0.00	- :		N/A	_
	5d. 5e.	Required repayments of r Insurance	etirement fund loans	50 50		\$_ \$		0.00 0.00			N/A N/A	_
	5e. 5f.	Domestic support obligat	ions	5f		\$ -		).00 ).00	- :		N/A	_
	5g.	Union dues		5 <u>.</u>		\$		0.00			N/A	_
	5h.	Other deductions. Specify	:		า.+	\$		0.00			N/A	_
6.	Add	the payroll deductions. Ad	d lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	(	0.00	\$		N/A	<u> </u>
7.	Calc	culate total monthly take-ho	me pay. Subtract line 6 from line 4.	7.		\$	2,500	0.00	\$		N/A	<u> </u>
8.	List 8a.	profession, or farm Attach a statement for each receipts, ordinary and nece	eceived: operty and from operating a business, property and business showing gross ssary business expenses, and the total									
	01	monthly net income.		88		\$		0.00	_		N/A	_
	8b.	Interest and dividends	that you, a non-filing spouse, or a depe	8k <b>ndont</b>	Э.	\$		0.00	_ \$		N/A	<u>.                                    </u>
	8c.	regularly receive	apport, child support, maintenance, divorce	ndent 80	Э.	\$	(	0.00	\$		N/A	
	8d.	Unemployment compens	ation	80	d.	\$	(	0.00	\$		N/A	<u> </u>
	8e.	Social Security		86	Э.	\$	(	0.00	\$		N/A	<u> </u>
	8f.	Include cash assistance an	Ince that you regularly receive If the value (if known) of any non-cash assist od stamps (benefits under the Supplement m) or housing subsidies.		÷.	\$	(	0.00	\$		N/A	
	8g.	Pension or retirement inc		80		\$	(	0.00	\$		N/A	 \
	8h.	Other monthly income. Sp	pecify:	8h	า.+	\$	(	0.00	+ \$		N/A	
9.	Add	all other income. Add lines	8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	(	0.00	\$		N/	A
10.		culate monthly income. Add the entries in line 10 for Debt	line 7 + line 9. or 1 and Debtor 2 or non-filing spouse.	10.	\$	2	2,500.00	+ 5	S	N/A	= \$ _	2,500.00
11.	Inclu othe	ide contributions from an unm r friends or relatives. not include any amounts alrea	ions to the expenses that you list in Sch arried partner, members of your household dy included in lines 2-10 or amounts that ar	l, your dep			•		•	n <i>Schedul</i>	e J. _+\$	0.00
12.		e that amount on the Summa	mn of line 10 to the amount in line 11. Try of Schedules and Statistical Summary of								\$	2,500.00
13.		No.	ecrease within the year after you file this	s form?							Combi month	nea ly income
		Yes. Explain:										

C:II-	in this info	tion to identify	NIT OBS					
FIII	in this informa	tion to identify yo	our case:					
Deb	tor 1	Hillary M. Ha	viland				eck if this is:	
Deb	tor 2						An amended filing	wing postpetition chapter
	ouse, if filing)	-						f the following date:
Unit	ed States Bankr	ruptcy Court for the	: WESTE	RN DISTRICT OF MICHI	GAN		MM / DD / YYYY	
	e number nown)							
Of	fficial Fo	rm 106J						
So	chedule	J: Your	Exper	ises				12/15
Be info	as complete a	and accurate as	possible.	If two married people and the community of the community				
		ibe Your House	hold					
1.	Is this a joir							
	■ No. Go to	o line 2. e <b>s Debtor 2 live</b> i	in a sonar	ate household?				
	□ 1es. <b>Doc</b>		iii a sepaii	ate nousenoia :				
	= ::	-	st file Offici	al Form 106J-2, <i>Expenses</i>	s for Separate House	hold of De	ebtor 2.	
2.	Do you have	e dependents?	■ No					
	Do not list Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.						☐ Yes
								□ No
								Yes
								□ No □ Yes
								_ □ Yes □ No
								☐ Yes
3.	expenses of	penses include f people other t	han $_{m \Box}$	No Yes				. — 188
	yourself and	d your depende	nts? ⊔	1 65				
		ate Your Ongoi						
exp				uptcy filing date unless y y is filed. If this is a supp				apter 13 case to report of the form and fill in the
the		h assistance an		government assistance i cluded it on <i>Schedule I:</i> \			Your exp	penses
(Oil	ilciai Folili 10	,oi. <i>)</i>						
4.		or home owners and any rent for the		ses for your residence. I r lot.	nclude first mortgage	4.	\$	450.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
		rty, homeowner's	s, or renter	's insurance		4b.	· -	0.00
			•	ipkeep expenses		4c.	:	0.00
_		owner's associat			ma aquitu la aaa	4d.	·	0.00
5.	Auditional r	nortgage payme	ents for yo	<b>our residence,</b> such as ho	me equity loans	5.	Φ	0.00

Deb	tor 1	Hillary M	I. Havila	nd			Case num	ber (if known)	
6.	Utilit	ties:							
0.	6a.	Electricity,	heat, nat	ural gas			6a.	\$	0.00
	6b.	•		age collection			6b.	\$	0.00
	6c.		•	•	ellite, and cable services		6c.	\$	150.00
	6d.	Other. Spe		,,	,		6d.	\$	0.00
7.		d and house	-	supplies					400.00
8.				education cost	S		8.	\$	0.00
9.		hing, laund					9.	\$	75.00
		•	•	and services			10.	\$	50.00
		ical and der					11.		50.00
			•		, bus or train fare.			<u> </u>	
		ot include ca			, buo or train raro.		12.	\$	450.00
13.	Ente	rtainment,	clubs, re	creation, newsp	apers, magazines, and	books	13.	\$	100.00
14.	Char	ritable cont	ributions	and religious d	onations		14.	\$	0.00
15.	Insu	rance.							
	Do no	ot include in	surance o	deducted from yo	ur pay or included in line	s 4 or 20.			
	15a.	Life insura	nce				15a.		0.00
	15b.	Health ins	urance				15b.	\$	0.00
		Vehicle ins					15c.	\$	280.00
	15d.	Other insu	ırance. Sp	ecify:			15d.	\$	0.00
16.			clude taxe	es deducted from	your pay or included in I	ines 4 or 20.			
	Spec	,					16.	\$	0.00
17.		allment or le						_	
		Car payme					17a.		0.00
		Car payme					17b.	· <u> </u>	0.00
				nticipated ren	tal/auto loan paymen	t	17c.	·	450.00
		Other. Spe	·				17d.	\$	0.00
18.					e, and support that you		18.	\$	0.00
10					dule I, Your Income (Off		10.	\$	
19.	Spec		s you illai	ke to support of	hers who do not live wi	ın you.	19.	Φ	0.00
20			orty ovno	nece not includ	ed in lines 4 or 5 of this	form or on School		ur Incomo	
20.		Mortgages			ed iii iiiles 4 or 5 or tilis	i loi ili oi oii ociiet	20a.		0.00
		Real estate		property			20b.	·	0.00
				er's, or renter's ir	neuranca		20c.		0.00
				, and upkeep ex			20d.		0.00
				ciation or condon			20a.		0.00
21							206.	·	
21.	Othe	a. Specily.	Licens	se, registratio	n, gifts, and misc. ex	penses		+φ	45.00
22.	Calc	ulate your r	monthly e	expenses					
	22a.	Add lines 4	through 2	.1.				\$	2,500.00
	22b.	Copy line 22	2 (monthly	y expenses for D	ebtor 2), if any, from Office	cial Form 106J-2		\$	
	22c.	Add line 22a	a and 22b	. The result is vo	our monthly expenses.			\$	2,500.00
				•	, , , , , , , , , , , , , , , , , , , ,			· —	
23.				net income.					
		. ,	13		y income) from Schedule	l.	23a.	·	2,500.00
	23b.	Copy your	monthly	expenses from li	ne 22c above.		23b.	-\$	2,500.00
	23c.				n your monthly income.		23c.	\$	0.00
		rne result	is your m	onthly net incom	e.		200.	_	0.00
24	Do v	ou expect a	an increa	se or decrease	in your expenses withir	the year after you	ı file this	form?	
									crease or decrease because of a
		fication to the			,			-	
	■ No	0.							
	□ Ye		Explain	here:					

Debtor 1	Hillary M. Havilan	nd		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT O	DF MICHIGAN	
Case number				
if known)				☐ Check if this is an amended filing

## Official Form 106Dec

# **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below		
Did y	ou pay or agree to pay someone who is NOT an attorney to	help you fill out bankr	uptcy forms?
	No		
	Yes. Name of person		Attach Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119)
that th	r penalty of perjury, I declare that I have read the summary a ney are true and correct.	nd schedules filed wit	h this declaration and
Н	s/ Hillary M. Haviland illary M. Haviland	Signature of Debt	or 2
S	ignature of Debtor 1		
D	ate March 16, 2021	Date	

	Hillary M. Havilan	d		
	First Name	Middle Name	Last Name	
Debtor 2 Spouse if, filing)	First Name	Middle Name	Last Name	
Jnited States	Bankruptcy Court for the:	WESTERN DISTRICT OF MICH	HIGAN	
Case number	·			☐ Check if this is an amended filing
tateme e as comple formation.	ete and accurate as possib	le. If two married people are filin	s Filing for Bankruptong together, both are equally responder. On the top of any additional page	nsible for supplying correct
	,	ital Status and Where You Lived	Before	
☐ Mar	your current marital status ried married	?		
Yes	. List all of the places you liv	red in the last 3 years. Do not inclu	ide where you live now.	
Debtor	1 Prior Address:	Dates Debtor 1	Debtor 2 Prior Address:	Dates Debtor
12744	1 Prior Address: Blue Lagoon Rd. ville, MI 49344	Dates Debtor 1 lived there From-To: approx. 07/2020 - 09/2020	Debtor 2 Prior Address:  ☐ Same as Debtor 1	Dates Debtor : lived there ☐ Same as Deb From-To:
12744   Shelby 2807 G	Blue Lagoon Rd.	From-To: approx. 07/2020 -	_	lived there ☐ Same as Deb
12744   Shelby 2807 G Fernda	Blue Lagoon Rd. ville, MI 49344 oodrich	From-To: approx. 07/2020 - 09/2020  From-To: approx. 02/2020 -	☐ Same as Debtor 1	lived there ☐ Same as Deb From-To: ☐ Same as Deb
12744   Shelby 2807 G Fernda 24141   Novi, M	Blue Lagoon Rd. ville, MI 49344 oodrich ale, MI 48220 Pheasant Run, apt. 107	lived there From-To: approx. 07/2020 - 09/2020  From-To: approx. 02/2020 - 07/2020  From-To:	☐ Same as Debtor 1	lived there  ☐ Same as Deb From-To:  ☐ Same as Deb From-To:

Debtor 1	Hillary M. Hav	/iland		Case	e number (if known)	
	_					
Part 2	Explain the Sou	rces of You	ır Income			
Fill in	n the total amount of	of income yo	mployment or from operating ou received from all jobs and a have income that you receiv	all businesses, including part-	-time activities.	endar years?
	No					
	Yes. Fill in the deta	ails.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	nuary 1 of current you filed for bank		■ Wages, commissions, bonuses, tips	\$5,025.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	
	calendar year: y 1 to December 3	1, 2020 )	■ Wages, commissions, bonuses, tips	\$26,575.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	
	calendar year befo y 1 to December 3		■ Wages, commissions, bonuses, tips	\$23,115.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	
Inclu and winn	ide income regardle other public benefit ings. If you are filin	ess of wheth t payments; g a joint cas e gross inco	e during this year or the two ler that income is taxable. Ex- pensions; rental income; intel- se and you have income that your ome from each source separa	amples of other income are a rest; dividends; money collect you received together, list it o	ted from lawsuits; royalties; a only once under Debtor 1.	
			Debtor 1		Debtor 2	
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
	calendar year befo		Retirement Income	\$319.00		
· · · · ·		· · · · ·				
Part 3:	List Certain Pay	ments You	Made Before You Filed for	Bankruptcy		
6. Are □	No. Neither Del	btor 1 nor D	's debts primarily consume bebtor 2 has primarily consu personal, family, or househo	u <mark>mer debts.</mark> Consumer debts	s are defined in 11 U.S.C. § 1	01(8) as "incurred by an
	During the 9	00 days befo	re you filed for bankruptcy, di	id you pay any creditor a total	I of \$6,825* or more?	
	□ <sub>Yes</sub>	List below e paid that cre not include	each creditor to whom you pa editor. Do not include paymer payments to an attorney for t t on 4/01/22 and every 3 year	nts for domestic support oblig his bankruptcy case.	ations, such as child support	and alimony. Also, do

3/18/21 10:53AM Debtor 1 Hillary M. Haviland Case number (if known) Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? □ No. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address **Dates of payment** Total amount Amount you Was this payment for ... paid still owe **Carlo Chacon** \$450 / month \$1,350.00 \$0.00 ■ Mortgage 641 3rd St. NW ☐ Car Grand Rapids, MI 49504 ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ■ Other residential lease Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No ☐ Yes. List all payments to an insider. **Insider's Name and Address** Amount you Reason for this payment Dates of payment Total amount still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment Include creditor's name still owe paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number DHS MGT/Novi Ridge Apts v. eviction unknown □ Pending Hillary M. Haviland ☐ On appeal unknown ☐ Concluded

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Deb	otor 1	Hillary M. Haviland		Case number (	if known)	
10.		n 1 year before you filed for bankruk all that apply and fill in the details be		vas any of your property repossessed, foreclosed	, garnished, attached	d, seized, or levied?
		No. Go to line 11.				
		Yes. Fill in the information below.				
	Cred	litor Name and Address	De	escribe the Property	Date	Value of the property
			Ex	cplain what happened		
11.		n 90 days before you filed for bank unts or refuse to make a payment b		did any creditor, including a bank or financial ins you owed a debt?	titution, set off any a	amounts from your
		No				
		Yes. Fill in the details.				
	Cred	litor Name and Address	De	escribe the action the creditor took	Date action was taken	Amount
12.		n 1 year before you filed for bankru -appointed receiver, a custodian, o		vas any of your property in the possession of an a ner official?	ssignee for the bend	efit of creditors, a
	_	No Yea				
	ш	Yes				
Par	t 5:	List Certain Gifts and Contribution	าร			
13.	_	<b>n 2 years before you filed for bank</b> i No	ruptcy,	did you give any gifts with a total value of more th	nan \$600 per person	?
		Yes. Fill in the details for each gift.				
		s with a total value of more than \$60 person	00	Describe the gifts	Dates you gave the gifts	Value
		on to Whom You Gave the Gift and ress:	ı			
14.	Withi	n 2 years before you filed for bank	ruptcy,	did you give any gifts or contributions with a total	I value of more than	\$600 to any charity?
	_ `	No				
		Yes. Fill in the details for each gift or o			_	
	more Chai	s or contributions to charities that e than \$600 rity's Name ress (Number, Street, City, State and ZIP Cod		Describe what you contributed	Dates you contributed	Value
Par	t 6:	List Certain Losses				
гаг	ι ο.	List Certain Losses				
15.		n 1 year before you filed for bankrumbling?	iptcy oi	r since you filed for bankruptcy, did you lose anytl	hing because of the	t, fire, other disaster,
		No				
		Yes. Fill in the details.				
		cribe the property you lost and the loss occurred	Includ	ribe any insurance coverage for the loss e the amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Par	t 7:	List Certain Payments or Transfer	•			
Гаі	. /.	List Certain Fayments of Transier	3			
16.	cons	ulted about seeking bankruptcy or	prepari	lid you or anyone else acting on your behalf pay o ing a bankruptcy petition? rs, or credit counseling agencies for services required		rty to anyone you
		No				
		Yes. Fill in the details.				
	Add			Description and value of any property transferred	Date payment or transfer was	Amount of payment
		il or website address on Who Made the Payment, if Not '	You		made	
Offici	al Form	•		of Financial Affairs for Individuals Filing for Bankruptcy		page <b>4</b>

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Debtor 1 Hillary M. Haviland Case number (if known) Person Who Was Paid Description and value of any property Date payment Amount of **Address** transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You The Law Offices of Ryan F. Beach, 01/28/2021 **Attorney Fees** \$1,122.00 **PLLC** 1550 East Beltline Ave. SE, Suite 300 Grand Rapids, MI 49506 rfbeachlaw@gmail.com Debtorcc, Inc. Pre-filing credit counseling 03/02/2021 \$19.95 378 Summit Ave. Jersey City, NJ 07306 www.debtorcc.org Law Offices of Joshua B. Sanfield Paid \$400 to bankruptcy attorney, but approx. \$100.00 28850 Mound Rd received refund of \$300.00 04/2020 Warren, MI 48092 https://www.sanfieldlaw.com/ 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of **Address** transferred or transfer was payment made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. **Person Who Received Transfer** Description and value of Describe any property or Date transfer was Address property transferred payments received or debts made paid in exchange Person's relationship to you Facebook Marketplace - several furniture - approx. \$5,000 \$1,000.00 - \$2,000.00 approx. January inviduals 2020 n/a 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

Name of trust Description and value of the property transferred Date Transfer was made

Yes. Fill in the details.

Debtor 1 Hillary M. Haviland Case number (if known) Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Last balance Type of account or Date account was Address (Number, Street, City, State and ZIP account number instrument closed, sold, before closing or moved, or transfer transferred **PNC Bank** XXXX-2020 - closed due \$0.00 Checking PO Box 856177 to negative □ Savings Louisville, KY 40285 balance ☐ Money Market □ Brokerage □ Other XXXX-Lake Michigan Credit Union 2020 - closed due \$0.00 Checking PO Box 2848 to negative □ Savings Grand Rapids, MI 49501 balance ■ Money Market □ Brokerage ☐ Other\_ 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Who else had access to it? Describe the contents Do you still Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, have it? State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? ☐ Yes. Fill in the details. Name of Storage Facility Who else has or had access Describe the contents Do you still to it? have it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. **Owner's Name** Describe the property Value Where is the property? (Number, Street, City, State and ZIP Address (Number, Street, City, State and ZIP Code)

Debtor 1 Hillary M. Haviland

Case number (if known)

Part 10:	Give Details About Environmental Information
----------	--

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.

	to own, operate, or utilize it, including disposal sites.  Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.				
Rep	ort all notices, releases, and proceedings that	you know about, regardless of when	they occurred.		
24.	Has any governmental unit notified you that y	you may be liable or potentially liable	under or in violation of an environm	ental law?	
	■ No □ Yes. Fill in the details.  Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice	
25.	P.5. Have you notified any governmental unit of any release of hazardous material?  No  Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice	
26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and ord  No  Yes. Fill in the details.				and orders.	
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case	
Par	t 11: Give Details About Your Business or C	onnections to Any Business			
27.	Within 4 years before you filed for bankrupto  A sole proprietor or self-employed in  A member of a limited liability compa  A partner in a partnership  An officer, director, or managing exect  An owner of at least 5% of the voting  No. None of the above applies. Go to Pa  Yes. Check all that apply above and fill in	a trade, profession, or other activity, ny (LLC) or limited liability partnershicutive of a corporation or equity securities of a corporation art 12.	either full-time or part-time ip (LLP)		
	Address	Describe the nature of the business  Name of accountant or bookkeeper	Employer Identification numbe Do not include Social Security Dates business existed		

3/18/21 10:53AM Debtor 1 Hillary M. Haviland Case number (if known) 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. **Date Issued** Name **Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Hillary M. Haviland Signature of Debtor 2 Hillary M. Haviland Signature of Debtor 1 Date March 16, 2021 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

10:53AM

	tion to identify your c				
Debtor 1	Hillary M. Haviland	Middle Name	Last Name		
Debtor 2	First Name	Middle News	LectNess		
0,	First Name	Middle Name	Last Name		
United States Bankr	ruptcy Court for the:	WESTERN DISTI	RICT OF MICHIGAN		
Case number					Charle if this is an
(ii kilowii)					Check if this is an amended filing
Official Forn	n 108				
		n for Indiv	iduals Filing Un	der Chanter	7 12/15
Otatement	Of Intention	1 IOI IIIGIV	riduais i iiiig Oii	der Griapter	12/13
	lual filing under chap		I out this form if:		
_	laims secured by you				
	personal property ar orm with the court wi		ot expired. you file your bankruptcy petiti	ion or by the date set fo	or the meeting of creditors.
	r is earlier, unless the		e time for cause. You must als		
	date the form.	in a joint case, bo	th are equally responsible for	supplying correct infor	mation. Both debtors must
Be as complete and	l accurate as possible	e. If more space is	s needed, attach a separate sh	eet to this form. On the	top of any additional pages.
	name and case num				, , , , , , , , , , , , ,
Part 1: List Your	Creditors Who Have	Secured Claims			
1. For any creditors	that you listed in Pa	rt 1 of Schedule D	: Creditors Who Have Claims	Secured by Property (C	Official Form 106D), fill in the
information below					
identity the credit	tor and the property th	at is collateral	What do you intend to do w secures a debt?	ith the property that	Did you claim the property as exempt on Schedule C?
Creditor's Fifth	n Third Bank		■ Surrender the property.		□ No
name:			☐ Retain the property and re	edeem it.	<b>■</b>
Description of	2018 Jeep Compas	s 74 000	☐ Retain the property and en Reaffirmation Agreement.		Yes
	niles	3 1 4,000	Retain the property and [ex		
securing debt:					
Part 2: List Your	Unexpired Personal	Property Leases			
For any unexpired	personal property lea	se that you listed			eases (Official Form 106G), fill ease period has not yet ended.
			the trustee does not assume it		ease period has not yet ended.
Describe your une	xpired personal prop	erty leases		W(	/ill the lease be assumed?
Describe your uno		city icuses			m the lease be assumed.
Lessor's name:	Carlo Chacon				l No
					Yes
Description of lease Property:	Description of leased Residential lease / month-to-month tenancy / Debtor is current and will				
-1 - 9	assume				

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

3/18/21 10:53AM

Deb	otor 1 Hillary M. Haviland	Case number (if known)
Par	t 3: Sign Below	
	er penalty of perjury, I declare that I have indicated my intention perty that is subject to an unexpired lease.	n about any property of my estate that secures a debt and any personal
X	/s/ Hillary M. Haviland	X
	Hillary M. Haviland	Signature of Debtor 2
	Signature of Debtor 1	
	Date March 16, 2021	Date

Fill in this information to identify your case:	Check one box only as di	rected in this form and in	Form
Debtor 1 Hillary M. Haviland	122A-1Supp:		
Debtor 2 (Spouse, if filing)	■ 1. There is no presu	ımption of abuse	
United States Bankruptcy Court for the: Western District of Michigan  Case number	applies will be m	o determine if a presumpt ade under <i>Chapter 7 Me</i> cial Form 122A-2).	
(if known)		does not apply now beca service but it could apply	
	☐ Check if this is ar	n amended filing	
Official Form 122A - 1 Chapter 7 Statement of Your Current Monthly II	ncome		04/20
Be as complete and accurate as possible. If two married people are filing together, both are edutated a separate sheet to this form. Include the line number to which the additional informaticase number (if known). If you believe that you are exempted from a presumption of abuse be qualifying military service, complete and file Statement of Exemption from Presumption of Ab	on applies. On the top of an cause you do not have prim	y additional pages, write y parily consumer debts or b	our name and ecause of
Part 1: Calculate Your Current Monthly Income			
What is your marital and filing status? Check one only.			
■ Not married. Fill out Column A, lines 2-11.			
☐ Married and your spouse is filing with you. Fill out both Columns A and B, lin	nes 2-11.		
$\square$ Married and your spouse is NOT filing with you. You and your spouse are	:		
☐ Living in the same household and are not legally separated. Fill out both	Columns A and B, lines 2	-11.	
☐ Living separately or are legally separated. Fill out Column A, lines 2-11; do penalty of perjury that you and your spouse are legally separated under non living apart for reasons that do not include evading the Means Test requirem	bankruptcy law that applie	s or that you and your sp	
Fill in the average monthly income that you received from all sources, derived during the 6 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not in spouses own the same rental property, put the income from that property in one column only. If y	through August 31. If the amound and include any income amount mo	unt of your monthly income vore than once. For example,	varied during if both
	Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before payroll deductions).	\$3,079.56	\$	
Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$	\$	
4. All amounts from any source which are regularly paid for household expense	es		

Debtor 1 0.00

Debtor 1 0.00

0.00 Copy here -> \$

0.00 Copy here -> \$

0.00

0.00

-\$

\$

-\$

0.00

0.00

0.00

0.00

of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not

filled in. Do not include payments you listed on line 3.

5. Net income from operating a business, profession, or farm

Net monthly income from a business, profession, or farm \$

Gross receipts (before all deductions)

Gross receipts (before all deductions)

7. Interest, dividends, and royalties

Ordinary and necessary operating expenses

6. Net income from rental and other real property

Ordinary and necessary operating expenses

Net monthly income from rental or other real property

Case number (if known)

Column B Column A Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For your spouse \$ 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled 0.00 if retired under any provision of title 10 other than chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronavirus disease 2019 (COVID-19); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.. 0.00 0.00 Total amounts from separate pages, if any. \$ 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for 3,079.56 3,079.56 each column. Then add the total for Column A to the total for Column B. Total current monthly Part 2: **Determine Whether the Means Test Applies to You** 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 3,079.56 Multiply by 12 (the number of months in a year) **x** 12 36,954.72 12b. The result is your annual income for this part of the form 12b. 13. Calculate the median family income that applies to you. Follow these steps: MΙ Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size of household. 53,159.00 13. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. Do NOT fill out or file Official Form 122A-2. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. 14b. Go to Part 3 and fill out Form 122A-2. Part 3: By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. X /s/ Hillary M. Haviland Hillary M. Haviland

Hillary M. Haviland

Debtor 1

3/18/21 10:53AM

Debtor 1	Hillary M. Haviland	Case number (if known)	
	Signature of Debtor 1		
Date	e March 16, 2021 MM / DD / YYYY		
	If you checked line 14a, do NOT fill out or file Form 122A-2.		
	If you checked line 14b, fill out Form 122A-2 and file it with this form.		

Debtor 1 Hillary M. Haviland

Case number (if known)

### **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 09/01/2020 to 02/28/2021.

### Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Amy and Chucks Tire LLC

Income by Month:

6 Months Ago:	09/2020	\$1,512.50
5 Months Ago:	10/2020	\$2,549.55
4 Months Ago:	11/2020	\$513.15
3 Months Ago:	12/2020	\$0.00
2 Months Ago:	01/2021	\$0.00
Last Month:	02/2021	\$0.00
	Average per month:	\$762.53

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Shipt

Constant income of \$2,317.03 per month.

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$78	administrative fee	
<u>+</u> \$15	trustee surcharge	
\$338	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$571 administrative fee \$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	<b>\$313</b>	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses">http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses</a>.

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/services-forms/bankruptcy/cre">http://www.uscourts.gov/services-forms/bankruptcy/cre</a> dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

3/18/21 10:53AM

### **United States Bankruptcy Court** Western District of Michigan

		* * escera = aserree or a randinger				
In re	Hillary M. Haviland	Debtor(s)	Case No. Chapter	7		
		Debtol(s)	Chapter			
	VED	IFICATION OF CREDITOR N	/ATDIY			
VERIFICATION OF CREDITOR MATRIX						
The abo	ove-named Debtor hereby verifies	that the attached list of creditors is true and co	rrect to the best	of his/her knowledge.		
Datas	Moreh 46, 2024	/o/ Hillow M. Hoviland				
Date:	March 16, 2021	/s/ Hillary M. Haviland Hillary M. Haviland				
		Signature of Debtor				
		Signature of Debtor				

ADS/COMENITY/SEPHORA PO BOX 182120 COLUMBUS OH 43218

ADS/COMENITY/ULTA MC PO BOX 182120 COLUMBUS OH 43218

AFFIRM INC 650 CALIFORNIA ST FL 12 SAN FRANCISCO CA 94108

ARS NATIONAL SERVICES
PO BOX 469046
ESCONDIDO CA 92046-9046

AT&T/U-VERSE PO BOX 537104 ATLANTA GA 30353

BANK OF AMERICA PO BOX 982238 EL PASO TX 79998

CARLO CHACON 12744 BLUE LAGOON DR. SHELBYVILLE MI 49344

CONSUMERS ENERGY
PAYMENT CENTER
PO BOX 740309
CINCINNATI OH 45274-0309

CREDIT ONE BANK
PO BOX 60500
CITY OF INDUSTRY CA 91716-0500

DTE ENERGY PO BOX 740786 CINCINNATI OH 45274-0786

ENVISION MEDICAL GROUP PO BOX 1870 CARY NC 27512-1870 FIFTH THIRD BANK PO BOX 630778 CINCINNATI OH 45263-0778

FIRST CREDIT INCORPORATED PO BOX 630659 CINCINNATI OH 45263-0659

HELVEY & ASSOCIATES INC. 1015 E. CENTER ST. WARSAW IN 46580

HENRY FORD HEALTH SYSTEM PO BOX 553920 DETROIT MI 48255-3920

INTERNAL REVENUE SERVICE PO BOX 7346 PHILADELPHIA PA 19101

JPMCB CARD SERVICES PO BOX 15369 WILMINGTON DE 19850

LMCU 4027 LAKE DR SE GRAND RAPIDS MI 49546

MERCHANTS & MEDICAL DEBT CORP 6324 TAYLOR DRIVE FLINT MI 48507-4685

MERCY HEALTH SAINT MARY'S PO BOX 932997 CLEVELAND OH 44193

MICHIGAN DEPT OF TREASURY BANKRUPTCY UNIT PO BOX 30168 LANSING MI 48909

MIDLAND CREDIT MANAGEMENT, INC 350 CAMINO DE LA REINA SUITE 100 SAN DIEGO CA 92108

MINTO MONEY PO BOX 58112 MINTO AK 99758

NATIONAL ENTERPRISE SYSTEMS 2479 EDISON BLVD, UNIT A TWINSBURG OH 44087-2340

NHHELC/GSM&R PO BOX 3420 CONCORD NH 03302

NOVI RIDGE APARTMENTS 23640 CHIPMUNK TRAIL NOVI MI 48375

PENN CREDIT CORPORATION 2800 COMMERCE DRIVE HARRISBURG PA 17110

PNC BANK
PO BOX 856177
LOUISVILLE KY 40285

PORTFOLIO RECOVERY ASSOCIATES PO BOX 12914 NORFOLK VA 23541

REVCO SOLUTIONS PO BOX 2589 COLUMBUS OH 43216-2589

SEQUIM ASSET SOLUTIONS 1130 NORTHCHASE PARKWAY SUITE 150 MARIETTA GA 30067

SYNCB/PPC PO BOX 530975 ORLANDO FL 32896

SYNCHRONY BANK/ART VAN PO BOX 965036 ORLANDO FL 32896 TRUE ACCORD 16011 COLLEGE BLVD SUITE 130 LENEXA KS 66219

U.S. ATTORNEY
BANKRUPTCY SECTION
PO BOX 208
GRAND RAPIDS MI 49501-0208